PLEASE NOTE: YOU MUST COMPLETE THE FOLLOWING

(Rev. 06/29/01)

## COMBINED DECLARATION AND POWER OF ATTORNEY FOR PATENT AND DESIGN APPLICATIONS

As a below named inventor, I hereby declare that: my residence, post office address and citizenship are as stated next to my name; that I verily believe that I am the original, first and sole inventor (if only one inventor is named below) or an original, first and joint inventor (if plural inventors are named below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Insert Title:	UMBRELLA-TYPE FOLDING FRAME MICICOLARLY FOR PUSH-CHAIRS							
Fill in Appropriate Information - For Use Without Specification Attached:	the specification of which the specification wa United States Appli and amended on the specification wa International Applic amended under PCT	cation Number us filed on cation Number	1 hereto,	as ; (if applicable) and/or as PCT ; and was (if applicable)				
	I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended be any amendment referred to above.  I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations, §1.56. I do not know and do not believe the same was ever known or used in the United States of America before my or our invention thereof, or patented or described in any printed publication in any country before my or our invention thereof or more than one year prior to this application that the same was not in public use or on sale in the United States of America more than one year prior to this application, that the invention has not been patented or made the subject of an inventor's certificate issued before the date of this application in any country foreign to the United States of America on an application filed by me or my legal representative or assigns more than twelve months (six months for designs) prior to this application, and that no application for patent or inventor's certificate on this invention has been filed in any country foreign to the United States of America prior to this application by me or my legal representatives or assigns, except as follows.  I hereby claim foreign priority benefits under Title 35, United States Code, §119(a)-(d) of any foreign application(s) for patent or inventor certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed:							
Insert Priority	Prior Foreign Application(s)			Priority Claimed				
Information:	VR2001A000022 (Number)	(Country)	(Month/Day/Year Filed)	Yes No				
(if appropriate)	(Number)	(Country)	(Month/Day/Year Filed)	Yes No				
<b>E</b>	(Number)	(Country)	(Month/Day/Year Filed)	Yes No				
Tank mak	(Number)	(Country)	(Month/Day/Year Filed)	Yes No				
	I hereby claim the benefit under Title 35, United States Code, §119(e) of any United States provisional applications(s) listed below.							
Insert Provisional Application(s): (if any):	(Application Number)		(Filing Date)					
	(Application Number) (Filing Date)							
	All Foreign Applications, if any, for any Patent or Inventor's Certificate Filed More than 12 Months (6 Months for Designs) Prior to the Filing Date of This Application:							
	Country	Application No	umber Date of Filing (Mont	h/Day/Year)				
Insert Requested Information: (if appropriate)								
	the subject matter of each provided by the first para patentability as defined in	h of the claims of this application graph of Title 35, United States	ode, §120 of any United States and/or PCT applic on is not disclosed in the prior United States and Code, §112, I acknowledge the duty to disclose ations, §1.56 which became available between the lication.	For PCT application in the manner information which is material to the				
Insert Prior U.S. Application(s): (if any)	(Application Number)	(Filing Date)	(Status - patented, pe	nding, abandoned)				
December 20	(Application Number)	(Filing Date)	(Status - patented, pe	nding, abandoned)				

Attorney Ducket No.

I hereby appoint practitioners at CUSTOMER NO. 2292 as manufacture and the inational application based on this application and/or are national application based on this application are transact all business in the United with the resulting patent based on instructions received from the entity who first sent the application papers to the practitioners, unless the inventor(s) or assignee provides said practitioners with a written notice to the contrary:

Send Correspondence to:

## BIRCH, STEWART, KOLASCH & BIRCH, LLP or CUSTOMER NO. 2292

P.O. Box 747 • Falls Church, Virginia 22040-0747 Telephone: (703) 205-8000 • Facsimile: (703) 205-8050

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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Il Name of First or Sole Inventor; ert Name of	GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE		DATE*			
ert Name of nventor → ert Date This Document is Signed	TOHASI, IVAN	lian James		Jan 29,2002			
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ert Post Office Address ->	MAILING ADDRESS (Complete Street Address including City, State & Country)						
	VIA S. PIZTRO, 34-36050 SOVIZZO (VICZNZA), ITALY						
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1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.	Residence (City, State & Country)	(1)	CITIZENSHI	J			
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	Residence (City, State & Country)	CITIZENSHIP		<u> </u>			
N	/						
	MAILING ADDRESS (Complete Street Address including City, State & Country)						
Name of Fifth nventor, if any:	GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE		DATE*			
see above							
	Residence (City, State & Country)		CITIZENSHIP				
	MAILING ADDRESS (Complete Street Address including City, State & Country)						
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Name of Sixth aventor, if any: see above	GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE		DATE*			
	Residence (City, State & Country)		CITIZENSHIP				
	MAILING ADDRESS (Complete Street Address inclu	iding City State & Country)					
	Tribuling Applicage (Complete gueet Addiess including City, State & Country)						